With a halt in the decline of COVID-19 cases in the US, CDC director warns "the virus is not done with us"

Benjamin Mateus 28 February 2021

On Friday, the US Centers for Disease Control and Prevention director, Dr. Rochelle Walensky, remarked at the White House briefing on the COVID pandemic, "Things are tenuous. Now is not the time to relax restrictions."

These comments were made in reference to the leveling of declines in new cases of COVID-19, which has public health officials extremely concerned. Since February 20, the seven-day average of COVID-19 cases has remained steady at just above 70,000 cases. Deaths due to COVID-19 have also stalled their decline with approximately 2,000 per day.

Meanwhile, the B.1.1.7 variant's detection has continued to rise, with 2,102 cases detected across 45 states. Though the number of cases is highest in Florida, they are growing fastest in Michigan, which now has 336 detected B.1.1.7 cases.

New York and New Jersey, where daily COVID-19 cases continue to remain high, are adding new cases most rapidly by comparison to other states. New York City health officials are attempting to downplay the emergence of a new variant of the coronavirus, B.1.526, that has independently developed the E484K mutation, known to evade immunity, similar to the B1.351 and P.1 variants from South Africa and Brazil, respectively. Since first detected in November, the New York variant has been rapidly growing, representing 12.3 percent of all the variants detected in the northeast of the United States by mid-February.

These developments in the pandemic's epidemiological curves are congruent with the analysis made by the CDC and scientists like Dr. Michael Osterholm, who warned that these variants would become the dominant strains in March. Estimates are that B.1.1.7 accounts for 10 percent of all the SARS-CoV-2 viruses in the US and has a

doubling time of seven to 10 days. Given its higher infectiousness compared to the "wild-type," it implies that the half-measures and limited mitigation strategies in place will not control the virus's spread.

Still, the massive efforts to push for school reopening are making for a perfect storm scenario. The warnings of Dr. Osterholm will come to pass. According to "Burbio's K-12 School Opening Tracker," a significant swath of the midwest, southeast and a portion of the northeast are either in traditional five-day in-person or hybrid instruction where children attend in person two to three days a week.

With warming trends in the weather and governors moving to open businesses, the spring surge has the potential for a catastrophe as experienced in Manaus, Brazil, on an unimaginable scale.

According to the *New York Times*, in the last two months, about 120,000 cases of COVID-19 have been linked to colleges and universities. That is a 31 percent increase since the end of 2020. In their survey, at least 17 colleges have reported more than 1,000 cases. In January, at the University of Michigan's Ann Arbor campus, three individuals had been identified with the B.1.1.7 variant.

In tandem with school openings, many state governors, Republican and Democratic alike, have quickly endorsed relaxing restrictions. For instance, Governor Henry McMaster of South Carolina announced that restaurants could serve alcohol up to 11 p.m. and residents could host events with more than 250 people without approval.

Leading the pack has been New York Governor Cuomo, who lifted restrictions in his state on gatherings and some nonessential businesses in January. Governor Greg Abbott of Texas is considering pulling back from the statewide mask mandate. Michigan and Virginia are moving to lift restrictions on dining capacity and extending the times

these venues can operate.

It is in this context that Dr. Walensky warned, "We at the CDC consider this a very concerning shift in the trajectory. I want to be clear: cases, hospital admissions, and deaths all remain very high and the recent shift in the pandemic must be taken extremely seriously. I know people are tired. They want to get back to life, to normal. But we're not there yet."

Dr. Anthony Fauci echoed the CDC director's remarks, adding, "We are at that very precarious position that we were right before the fall surge where anything that could perturb that could give us another surge. We don't want to be people always looking at the dark side of things, but you want to be realistic. So, we have to carefully look at what happens over the next week or so with those numbers before you start making the understandable need to relax on certain restrictions."

On the one hand, the White House is cautioning against a rapid reopening, and on the other they are all too eager to see schools operating and parents back at work. The warnings being voiced by the pandemic task force won't stem a future surge as no efforts are being made to heed their own warnings. However, they will provide cover for the administration by arguing the population's irresponsibility was to blame for the fourth surge.

Worse, with approximately 50 million people (15 percent) having received one dose of a COVID-19 vaccine, the Biden administration is playing a game of brinkmanship with Americans' life and safety. They are hoping that the vaccine can blunt the impact on health systems and older adults' health before the next surge slams into communities. In the meantime, they are doing little to shore up the public health infrastructure.

Even CDC Director Walensky had to admit, "the virus is not done with us." There is more energy in the pandemic left to fuel future surges. Like developmental biologist at the University of Calgary, Dr. Malgorzata Gasperowicz, some have called for an approach that New Zealand took early in the course of the pandemic. With 2,376 cases of COVID-19 and 26 deaths total, the island nation has essentially suppressed new cases of COVID-19 down to single-digits.

By adopting a strict two-month lockdown, cases could be quickly brought down to near zero. Dr. Gasperowicz told CityNews, Canadian news and current affairs programming based in Toronto, Ontario: "Have mandatory quarantine for inter-provincial and international travelers, so we don't bring the new variant anymore. Basically, everything that's nonessential should be shut down."

The graph above represents Dr. Gasperowicz's modeling analysis of Alberta, Canada, over two months, under different policy assumptions, either lax mitigation measures, similar to those enacted in most states, provinces and countries, and under a strict lockdown scenario.

The top line shows that lax mitigation measures, where the reproduction number remains close to 1, leads to a prolonged slow decline in future cases and 1,200 deaths, six times the number of deaths under the strict lockdown strategy where the *R* number is brought down under 0.6. In the strict lockdown scenario, not only are lives saved, but the burden of the virus is sufficiently low to allow public health officials to utilize testing and contact tracing to stay ahead of new infections.

Other doctors have sounded similar warnings.

Dr. Michael Osterholm, director of the Center for Infectious Disease Research and Policy at the University of Minnesota, told the *Star Tribune*, "We've still got 60 percent of our population that is vulnerable to this virus after a year. And look what we've been through with clinical disease and vaccination to get to 40 percent protection."

Dr. Gregory Poland, a vaccine immunology specialist at Mayo Clinic, explained that no one could clearly explain the recent declining trends. Still, he worries that it leads politicians and business leaders to call for the lifting of restrictions. He said, "It is a race between vaccine and virus. Because we don't have enough vaccine out yet, and because we don't have a policy of giving as many people as we can one dose as quickly as possible, I believe we will see a fourth wave—a resurgence."



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